



APPLICATION

## **TENNESSEE DEPARTMENT OF CORRECTION'S (TDOC) CITIZENS CORRECTIONAL ACADEMY**

The Department of Correction's Citizens Correctional Academy gives local citizens the opportunity to learn about TDOC's mission, operations, and its impact on the community. The classes will be held weekly at various TDOC locations, and will also include a graduation ceremony.

### **Requirements and Limitations**

Citizens applying for the TDOC Citizens Correctional Academy must adhere to the following standards:

1. Must be 18 years of age or older;
2. No criminal history other than minor traffic violations;
3. Must attend the required days and times for your session which includes a graduation ceremony ;
4. Must sign all required waivers and agreements;
5. Must not currently have a family member or loved one incarcerated in TDOC custody or on Community Supervision.

All applicants to the Citizens Correctional Academy will undergo a background check and are subject to the approval of the department.

To apply, complete the application and submit to [TDOC.Communications@tn.gov](mailto:TDOC.Communications@tn.gov).





TENNESSEE DEPARTMENT OF CORRECTION  
**CITIZENS CORRECTIONAL ACADEMY APPLICATION**

**CLASS #** \_\_\_\_\_  
(For Office Use Only)

Full Legal Name: \_\_\_\_\_  
(Last) (First) (Middle)

List all other names that you have used, including MAIDEN NAMES and NICKNAMES:

\_\_\_\_\_  
\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female

Social Security Number: \_\_\_\_\_  
**(Required)**

Current Employer & Address: \_\_\_\_\_  
(If you are retired, list most recent employer and date you left)

**Contact Information:**

Current Address: \_\_\_\_\_  
Street City State Zip Code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

In case of emergency, please contact:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Purpose of Application:**

Please briefly explain your motivation for wanting to attend TDOC's Citizens Correctional Academy:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Full Legal Name: \_\_\_\_\_

**Other Information:**

Are you currently on the Visitation List of an inmate confined in the Tennessee Department of Correction?

\_\_\_\_\_Yes \_\_\_\_\_No

If yes, what is his/her name, TDOC number and your relationship: \_\_\_\_\_

\_\_\_\_\_

Are you now, or have you ever been an employee or contract employee of TDOC?

\_\_\_\_\_Yes \_\_\_\_\_No If yes, when? \_\_\_\_\_

Other than a minor traffic violation, have you ever been arrested and/or convicted of a misdemeanor or felony offense? If yes, please explain and include date, place, Law Enforcement Agency, charge and disposition:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Commitment:**

Out of consideration to the other participants; do you agree to attend ALL sessions?

\_\_\_\_\_Yes \_\_\_\_\_No

**Understanding:**

I hereby authorize the Tennessee Department of Correction to conduct a standard background check. I understand this will include, but will not be limited to, any record of charges, prosecutions or convictions for criminal offenses. This investigation shall be used for the sole purpose of the application process. My consent is only valid for a three (3) month period from the signed date of this application. I understand that my acceptance into TDOC's Citizens Correctional Academy is not guaranteed and is at the discretion of the Commissioner or his Designee.

\_\_\_\_\_

(Signature of Applicant)

(Date)

\_\_\_\_\_

(Printed name of Applicant)

\_\_\_\_\_

(Commissioner/Designee)

(Date)

\_\_\_\_\_Approved \_\_\_\_\_Denied

Attach a recent photo of **yourself** **only** here. Photo must be of quality that can be used for identification purposes. No black & white photographs or pictures copied from a copy machine.